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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number

09/1784, 095 02-16-2001

Filing Date

Applicant(s)

William KIRSH et al.

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
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Total Indep	12								
Total Depend	9								
Total Claims	21								

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